PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

Application or Docket Number

10/069328

(Column 1) (Column 2)								SWALL ENTITY			other than or small entity	
TOTAL CLAIMS			1				RATE	FEE	OR	RATE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FI		-	BASIC FE	FEE
T	OTAL CHARGE	ABLE CLAIMS	32 minus 20= *		* 17		.					290
-	DEPENDENT (0			∞	}	X\$ 9=		OR	X\$18=	8///
 		NDENT CLAIM F	minus 3 = F					X42=		OR	X84=	
			110011					+140=		OR	+280=	
*	f the differenc	e in column 1 is	less than a	less than zero, enter "0" in column 2				TOTAL		OR	TOTAL	106
Claims as amended - Part II									L	- 1 - · · ·		THAN
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST						71 c=	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENTA	1007	REMAINING AFTER AMENDMENT	3.	NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	21.111	=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
							L	TOTAL		4 8	TOTAL	
		(Column 1)		(Colum	n 2\	(Column 3)	Α	DDIT. FEE	<u> </u>	OR	ADDIT. FEE	
2	. Harris	CLAIMS	7	HIGHE	ST				ADDI-	n r		ADDI
AMENDMENT		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID F	JSLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL FEE
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A IME	Independent	☆	Minus	ann a		=	-	X42=			X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┢			OR		
								+140=		OR	+280=	
				•			AD	TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE	
		(Column 1)	e in an	(Column		(Column 3)						
		REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL F.DE
	Total	×	Minus	**		=		X\$ 9=		00	X\$18=	44
	Independent	×	Minus	û û û		=	-			OR		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	X42=		OR _	X84=	
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
oo If	If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE										TOTAL DDIT. FEE	
T	he "Highest Numi	nber Previously Pai ber Previously Paid	For" (Total or	o SPACE is le Independent)	ess than is the h	3, enter "3." ighest number :			ropriate box			

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